

The logo for PHARMAC (Te Pātaka Whaioranga) is a white circle containing the text 'PHARMAC' in a large, bold, sans-serif font, with 'TE PĀTAKA WHAIORANGA' in a smaller, all-caps, sans-serif font below it. The background of the entire page is a grey field with a large, intricate white pattern of concentric, overlapping lines that form a complex, organic shape resembling a stylized 'P' or a series of interlocking curves.

PHARMAC
TE PĀTAKA WHAIORANGA

Pharmaceutical Management Agency
New Zealand
Pharmaceutical Schedule

Update

August 2021

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Summary of Pharmac decisions

EFFECTIVE 1 AUGUST 2021

New listings (pages 18-19)

- Insulin infusion set (steel cannula, straight insertion) (TruSteel) 6 mm steel cannula; straight insertion; 80 cm line x 10 with 10 needles and 8 mm steel cannula; straight insertion; 80 cm line x 10 with 10 needles, 1 OP – Special Authority – Retail pharmacy – maximum 3 sets per prescription; only on a prescription and maximum of 13 infusion sets will be funded per year
- Indapamide (Mylan Indapamide) tab 2.5 mg – section 29 and wastage claimable
- Cyproterone acetate (Rex) tab 50 mg – section 29 and wastage claimable
- Ibuprofen (Brufen SR) tab long-acting 800 mg
- Febuxostat (Febuxostat multichem) tab 80 mg and 120 mg – Special Authority – Retail pharmacy
- Rasagiline (Azilect) tab 1 mg – stat dispensing, section 29 and wastage claimable
- Paracetamol (Pacimol) tab 500 mg - blister pack, 1,000 pack – maximum of 300 tab per prescription; can be waived by endorsement, up to 30 tab available on a PSO
- Mirtazapine (Noumed) tab 30 mg and 45 mg – section 29 and wastage claimable
- Cyclophosphamide (Cyclonex) tab 50 mg – PCT – Retail pharmacy-Specialist
- Pirfenidone (Esbriet) tab 267 mg – Retail pharmacy-Specialist – Special Authority, Pirfenidone is not subsidised in combination with subsidised nintedanib
- Sodium hyaluronate [hyaluronic acid] (Hylo-Fresh) eye drops 1 mg per ml, 10 ml OP – Special Authority – Retail pharmacy (Pharmacode 2608162)
- Enteral feed 2 kcal/ml (Ensure Two Cal HN RTH) liquid, 1,000 ml OP – Special Authority – Hospital pharmacy [HP3]

Changes to restrictions (pages 20-22)

- Misoprostol (Cytotec) tab 200 mcg – removal of subsidy by endorsement
- Prazosin (Apo-Prazosin) tab 1 mg, 2 mg and 5 mg – addition of subsidy by endorsement
- Pindolol (Apo-Pindolol) tab 5 mg, 10 mg and 15 mg – addition of subsidy by endorsement
- Nifedipine tab long-acting 20 mg (Mylan (12 hr release)) and tab long-acting 30 mg and 60 mg (Mylan (24 hr release)) – brand name change
- Mifepristone (Mifegyne) tab 200 mg – removal of subsidy by endorsement
- Selegiline hydrochloride (Apo-Selegiline S29) tab 5 mg – addition of subsidy by endorsement
- Pregabalin (Pregabalin Pfizer) cap 25 mg – reinstate stat dispensing
- Cyclophosphamide (Endoxan and Procytox) tab 50 mg – wastage claimable moved to section 29 brands only

Summary of Pharmac decisions – effective 1 August 2021 (continued)

- Megestrol acetate (Apo-Megestrol) tab 160 mg – addition of subsidy by endorsement
- Rituximab (Riximyo) inj 100 mg per 10 ml vial, 500 mg per 50 ml vial (Riximyo) and 1 mg for ECP (Baxter) – amended Special Authority criteria
- Meningococcal B multicomponent vaccine (Bexsero) inj 175 mcg per 0.5 ml prefilled syringe – amended restriction criteria
- Meningococcal (Groups A, C, Y and W-135) conjugate vaccine (Menactra) inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial – amended restriction criteria
- Meningococcal C conjugate vaccine (Neisvac-C) inj 10 mcg in 0.5 ml syringe – amended restriction criteria

Increased subsidy (pages 23-26)

- Glibenclamide (Daonil) tab 5 mg
 - Pioglitazone (Vexazone) tab 15 mg, 30 mg and 45 mg, 90 tab pack
 - Atropine sulphate (Martindale) inj 600 mcg per ml, 1 ml ampoule
 - Atenolol (Mylan Atenolol) tab 50 mg and 100 mg
 - Felodipine (Felo-5 ER) tab long-acting 5 mg
 - Clonidine tab 150 mcg (Catapres) and inj 150 mcg per ml, 1 ml ampoule (Medsurge)
 - Sildenafil (Vedafil) tab 25 mg, 50 mg and 100 mg
 - Tretinoin (ReTrieve) crm 0.5 mg per g, 50 g OP
 - Betamethasone valerate crm 0.1%, 50 g OP (Beta Cream), oint 0.1%, 50 g OP (Beta Ointment) and scalp app 0.1%, 100 ml OP (Beta Scalp)
 - Oxytocin with ergometrine maleate (Syntometrine) inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml
 - Dexamethasone (Dexmethsone) tab 0.5 mg and 4 mg
 - Cyproterone acetate (Siterone) tab 50 mg and 100 mg
 - Somatropin (Omnitrope) inj 5 mg and 15 mg cartridge
 - Flucloxacillin (AFT) grans for oral liq 25 mg per ml, 100 ml
 - Phenoxymethylpenicillin (Cilicaine VK) cap 250 mg and 500 mg
 - Tobramycin (Tobramycin Mylan) inj 40 mg per ml, 2 ml vial
 - Trimethoprim (TMP) tab 300 mg
 - Trimethoprim with sulphamethoxazole [co-trimoxazole] (Trisul) tab trimethoprim 80 mg with sulphamethoxazole 400 mg
 - Isoniazid (PSM) tab 100 mg
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Summary of Pharmac decisions – effective 1 August 2021 (continued)

- Isoniazid with rifampicin (Rifinah) tab 100 mg with rifampicin 150 mg and tab 150 mg with rifampicin 300 mg
- Valaciclovir (Vaclovir) tab 500 mg and 1,000 mg
- Nevirapine (Nevirapine Alphapharm) tab 200 mg
- Diclofenac sodium (Diclofenac Sandoz) tab EC 25 mg and 50 mg
- Naproxen tab 500 mg (Noflam 500), tab long-acting 750 mg (Naprosyn SR 750) and tab long-acting 1 g (Naprosyn SR 1000)
- Pamidronate disodium (Pamisol) inj 9 mg per ml, 10 ml vial
- Orphenadrine citrate (Norflex) tab 100 mg
- Fentanyl (Fentanyl Sandoz) patch 12.5 mcg per hour, 25 mcg per hour, 50 mcg per hour, 75 mcg per hour and 100 mcg per hour
- Methadone hydrochloride oral liq 2 mg per ml (Biodone), 5 mg per ml (Biodone Forte) and 10 mg per ml (Biodone Extra Forte)
- Pethidine hydrochloride (PSM) tab 50 mg
- Moclobemide (Aurorix) tab 150 mg (Pharmacode 2602385) and 300 mg
- Midazolam (Midazolam-Baxter and Mylan Midazolam) inj 1 mg per ml, 5 ml ampoule
- Dexamfetamine sulfate (PSM) tab 5 mg
- Methotrexate (Trexate) tab 2.5 mg and 10 mg
- Doxorubicin hydrochloride inj 2 mg per ml, 100 ml vial (Doxorubicin Ebewe) and inj 1 mg for ECP (Baxter)
- Epirubicin hydrochloride inj 2 mg per ml, 100 ml vial (Epirubicin Ebewe) and inj 1 mg for ECP (Baxter)
- Mitomycin C (Baxter) inj 1 mg for ECP
- Letrozole (Letrole) tab 2.5 mg
- Salbutamol (Asthalin) nebuliser soln, 1 mg per ml, 2.5 ml ampoule and 2 mg per ml, 2.5 ml ampoule
- Salbutamol with ipratropium bromide (Duolin) nebuliser soln 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule

Decreased subsidy (page 26)

- Varenicline tartrate (Varenicline Pfizer) tab 0.5 mg × 11 and 1 mg × 42, 53 OP and tab 1 mg
 - Cetirizine hydrochloride (Histaclear) oral liq 1 mg per ml, 200 ml
 - Brimonidine tartrate (Arrow-Brimonidine) eye drops 0.2%, 5 ml OP
 - Sodium hyaluronate [hyaluronic acid] (Hilo-Fresh) eye drops 1 mg per ml, 10 ml OP (Pharmacode 2396238)
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Tender News

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) changes – effective 1 September 2021

Chemical Name	Presentation; Pack size	PSS/SSS	PSS/SSS brand (and supplier)
Aciclovir	Eye oint 3%; 4.5 g OP	PSS	ViruPOS (AFT)
Brinzolamide	Eye drops 1%; 5 ml OP	PSS	Azopt (Novartis)
Glyceryl trinitrate	Oint 0.2%; 30 g OP	PSS	Rectogesic (Healthcare Logistics)
Latanoprost with timolol	Eye drops 0.005% with timolol 0.5%; 2.5 ml OP	SSS	Arrow-Lattim (Teva)
Lithium carbonate	Tab long-acting 400 mg; 100 tab	PSS	Priadel (Clinect)
Loratadine	Oral liq 1 mg per ml; 100 ml	SSS	Haylor syrup (Boucher & Muir)
Oxycodone hydrochloride	Oral liq 5 mg per 5 ml; 250 ml	PSS	OxyNorm (Mundipharma)

Looking Forward

This section is designed to alert both pharmacists and prescribers to possible future changes to the Pharmaceutical Schedule. It may also assist pharmacists, distributors and wholesalers to manage stock levels.

Decisions for implementation 1 September 2021

- Clarithromycin (Klacid) tab 250 mg and 500 mg – new listing
- Clomipramine hydrochloride (Clomipramine Teva) tab 10 mg and 25 mg – new listing
- Lopinavir with ritonavir (Mylan) tab 100 mg with ritonavir 25 mg and tab 200 mg with ritonavir 50 mg – new listing
- Octreotide long-acting (Octreotide Depot Teva) inj depot 10 mg, 20 mg and 30 mg prefilled syringe – chemical and presentation name change, new listing and amended restriction criteria
- Rivastigmine (Rivastigmine Patch BMN 5 and Rivastigmine Patch BMN 10) patch 4.6 mg per 24 hour and 9.5 mg per 24 hour – new listing

Possible decisions for future implementation 1 September 2021

- Dulaglutide (Trulicity) inj 1.5 mg per 0.5 ml prefilled pen – new listing with Special Authority added (pending Medsafe approval)
- Propranolol (Propranolol Teva) tab 10 mg – new listing
- Sumatriptan (Sumagran) tab 50 mg and 100 mg – new listing

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Abacavir sulphate	Tab 300 mg	Ziagen	2022
Abacavir sulphate with lamivudine	Tab 600 mg with lamivudine 300 mg	Kivexa	2022
Aciclovir	Tab dispersible 200 mg, 400 mg & 800 mg	Lovir	2022
Acitretin	Cap 10 mg & 25 mg	Novatretin	2023
Alendronate sodium	Tab 70 mg	Fosamax	2022
Alendronate sodium with colecalciferol	Tab 70 mg with colecalciferol 5,600	Fosamax Plus	2022
Allopurinol	Tab 100 mg & 300 mg	DP-Allopurinol	2023
Ambrisentan	Tab 5 mg & 10 mg	Ambrisentan Mylan	2023
Amiodarone hydrochloride	inj 50 mg per ml, 3 ml ampoule Tab 100 mg & 200 mg	Max Health Aratac	2022
Amisulpride	Tab 100 mg, 200 mg & 400 mg	Sulprix	2022
Amitriptyline	Tab 10 mg, 25 mg & 50 mg	Arrow-Amitriptyline	2023
Amlodipine	Tab 2.5 mg, 5 mg & 10 mg	Vasorex	2023
Amorolfine	Nail soln 5%, 5 ml OP	MycoNail	2023
Amoxicillin	Grans for oral liq 125 mg per 5 ml Grans for oral liq 250 mg per 5 ml Cap 250 mg & 500 mg	Alphamox 125	2023
		Alphamox 250	2022
		Alphamox	2022
Amoxicillin with clavulanic acid	Tab 500 mg with clavulanic acid 125 mg	Curam Duo 500/125	2023
Anastrozole	Tab 1 mg	Anatrole	2023
Apomorphine hydrochloride	Inj 10 mg per ml, 5 ml ampoule Inj 10 mg per ml, 2 ml ampoule	Movapo	2023
Ascorbic acid	Tab 100 mg	Cvite	2022
Asprin	Tab 100 mg	Ethics Aspirin EC	2022
	Tab dispersible 300 mg	Ethics Aspirin	2022
Atazanavir sulphate	Cap 150 mg & 200 mg	Teva	2022
Atomoxetine	Cap 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg & 100 mg	Generic Partners	2022
Atropine sulphate	Eye drops 1%, 15 ml OP	Atropt	2023
Azathioprine	Tab 25 mg & 50 mg	Azamun	2022
Bacillus calmette-guerin vaccine	Inj Mycobacterium bovis BCG (Bacillus Calmette-Guerin), Danish strain 1331, live attenuated, vial with diluent	BCG Vaccine	2024
Bendroflumethiazide [Bendrofluazide]	Tab 2.5 mg & 5 mg	Arrow-Bendrofluazide	2023
Benzatropine mesylate	Inj 1 mg per ml, 2 ml	Phebra	2023

*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Benzylpenicillin sodium [Penicillin G]	Inj 600 mg (1 million units) vial	Sandoz	2023
Bethahistine dihydrochloride	Tab 16 mg	Vergo 16	2023
Betamethasone dipropionate	Crn & oint 0.05%, 50 g OP	Diprosone	2023
Bicalutamide	Tab 50 mg	Binarex	2023
Bisoprolol fumarate	Tab 2.5 mg, 5 mg & 10 mg	Bisoprolol Mylan	2023
Blood glucose diagnostic test meter	Meter with 50 lancets, a lancing device and 10 diagnostic test strips, 1 OP	CareSens N CareSens N POP CareSens N Premier	2022
Blood glucose diagnostic test strip	Test strips, 50 test OP	CareSens N CareSens PRO	2022
Blood ketone diagnostic test strip	Test strips, 10 strip OP	KetoSens	2022
Budesonide	Metered aqueous nasal spray, 50 mcg & 100 mcg per dose, 200 dose OP	SteroClear	2023
Buprenorphine with naloxone	Tab sublingual 2 mg with naloxone 0.5 mg & 8 mg with naloxone 2 mg	Buprenorphine Naloxone BNM	2022
Bupropion hydrochloride	Tab modified-release 150 mg	Zyban	2023
Caffeine citrate	Oral liq 20 mg per ml (10 mg base per ml), 25 ml OP	Biomed	2022
Calcitriol	Cap 0.25 mcg & 0.5 mcg	Calcitriol-AFT	2022
Calcium carbonate	Tab 1.25 g (500 mg elemental)	Calci-Tab 500	2023
Calcium folinate	Inj 10 mg per ml, 5 ml vial	Calcium Folate Sandoz	2022
Capecitabine	Tab 150 mg & 500 mg	Capercit	2022
Capsaicin	Crn 0.025%, 45 g OP Crn 0.075%, 45 g OP	Zostrix Zostrix HP	2023
Cefaclor monohydrate	Cap 250 mg Grans for oral liq 125 mg per 5 ml	Ranbaxy-Cefaclor	2022
Cefalexin	Cap 250 mg	Cefalexin ABM	2022
Cefazolin	Inj 500 mg & 1 g vial	AFT	2023
Ceftriaxone	Inj 500 mg & 1 g vial	Ceftriaxone-AFT	2022
Cefuroxime axetil	Tab 250 mg	Zinnat	2022
Cetirizine hydrochloride	Tab 10 mg	Zista	2022
Cetomacrogol with glycerol	Crn 90% with glycerol 10%, 500 ml OP & 1,000 ml OP	Boucher	2022
Chloramphenicol	Eye oint 1%, 5 g OP Eye drops 0.5%, 10 ml OP	Devatis Chlorofast	2022

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Chlorpromazine hydrochloride	Tab 10 mg, 25 mg & 100 mg Inj 25 mg per ml, 2 ml	Largactil	2022
Chlortalidone [chlorthalidone]	Tab 25 mg	Hygroton	2022
Cilazapril	Tab 0.5 mg, 2.5 mg & 5 mg	Zapril	2022
Ciprofloxacin	Tab 250 mg, 500 mg & 750 mg	Cipflox	2023
Clindamycin	Cap hydrochloride 150 mg Inj phosphate 150 mg per ml, 4 ml ampoule	Dalacin C	2022
Clobetasol propionate	Crn 0.05%, 30 g OP Oint 0.05%, 30 g OP Scalp app 0.05%, 30 ml OP	Dermol	2022
Clonidine	Patch 2.5 mg, 100 mcg per day Patch 5 mg, 200 mcg per day Patch 7.5 mg, 300 mcg per day	Mylan	2023
Clopidogrel	Tab 75 mg	Clopidogrel Multichem	2022
Clotrimazole	Vaginal crm 1% with applicators, 35 g OP Vaginal crm 2% with applicators, 20 g OP	Clomazol	2022
Coal tar	Soln BP	Midwest	2022
Codeine phosphate	Tab 15 mg, 30 mg & 60 mg	PSM	2023
Colecalciferol	Cap 1.25 mg (50,000 iu)	Vit.D3	2023
Compound electrolytes	Powder for oral soln	Electral	2022
Compound hydroxybenzoate	Soln	Midwest	2022
Condoms	60 mm 49 mm 53 mm, 0.05 mm thickness 53 mm 53 mm, strawberry, red 53 mm, chocolate, brown 56 mm 56 mm, 0.08 mm thickness 56 mm, 0.08 mm thickness, red 56 mm, 0.05 mm thickness 56 mm, chocolate 56 mm, strawberry	Shield XL Gold Knight Moments Gold Knight	30/09/2022
Cyclizine lactate	Inj 50 mg per ml, 1 ml	Hameln	2022
Cyproterone acetate with ethinyloestradiol	Tab 2 mg with ethinyloestradiol 35 mcg and 7 inert tabs	Ginet	2023
Darunavir	Tab 400 mg & 600 mg	Darunavir Mylan	2023
Desmopressin acetate	Nasal spray 10 mcg per dos, 6 ml OP	Desmopressin-PH&T	2023

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Dexamethasone phosphate	Inj 4 mg per ml, 1 ml & 2 ml ampoule	Dexamethasone Phosphate Panpharma	2022
Diazepam	Tab 2 mg & 5 mg	Arrow-Diazepam	2023
Digoxin	Tab 62.5 mcg Tab 240 mcg	Lanoxin PG Lanoxin	2022
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2022
Dimethicone	Crn 5% pump bottle, 500 ml OP Lotn 4%, 200 ml OP	healthE Dimethicone 5% healthE Dimethicone 4%	2022
Diphtheria, tetanus and pertussis vaccine	Inj 2 IU diphtheria toxoid with 20 IU tetanus toxoid, 8 mcg pertussis toxoid, 8 mcg pertussis filamentous haemagglutinin and 2.5 mcg pertactin in 0.5 ml syringe	Boostrix	2024
Diphtheria, tetanus, pertussis and polio vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin and 80 D-antigen units poliomyelitis virus in 0.5ml syringe	Infanrix IPV	2024
Diphtheria, tetanus, pertussis, polio, hepatitis B and haemophilus influenzae type B vaccine	Inj 30 IU diphtheria toxoid with 40 IU tetanus toxoid, 25 mcg pertussis toxoid, 25 mcg pertussis filamentous haemagglutinin, 8 mcg pertactin, 80 D-AgU polio virus, 10 mcg hepatitis B surface antigen in 0.5ml syringe	Infanrix-hexa	2024
Dipyridamole	Tab long-acting 150 mg	Pytazen SR	2022
Docosate sodium	Tab 50 mg & 120 mg	Coloxyl	2023
Donepezil hydrochloride	Tab 5 mg & 10 mg	Donepezil-Rex	2023
Dual blood glucose and blood ketone diagnostic test meter	Meter with 50 lancets, a lancing device and 10 blood glucose diagnostic test strips, 1 OP	CareSens Dual	2022
Efavirenz with emtricitabine and tenofovir disoproxil	Tab 600 mg with emtricitabine 200 mg and tenofovir disoproxil 245 mg (300 mg as a maleate)	Mylan	2022
Emtricitabine	Cap 200 mg	Emtriva	2022
Emtricitabine with tenofovir disoproxil	Tab 200 mg with tenofovir disoproxil 245 mg (300.6 mg as a succinate)	Teva	2022
Emulsifying ointment	Oint BP	Emulsifying Ointment ADE	2023
Enalapril maleate	Tab 5 mg, 10 mg & 20 mg	Acetec	2022

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Epoetin alfa	Inj 1,000 iu in 0.5 ml, syringe Inj 2,000 iu in 1 ml, syringe Inj 3,000 iu in 0.3 ml, syringe Inj 4,000 iu in 0.4 ml, syringe Inj 5,000 iu in 0.5 ml, syringe Inj 6,000 iu in 0.6 ml, syringe Inj 8,000 iu in 0.8 ml, syringe Inj 10,000 iu in 1 ml, syringe Inj 40,000 iu in 1 ml, syringe	Binocrit	2022
Erythromycin (as lactobionate)	Inj 1 g vial	Erythrocin IV	2022
Etanercept	Inj 25 mg Inj 50 mg autoinjector Inj 50 mg prefilled syringe	Enbrel	2024
Ethinylestradiol and norethisterone	Tab 35 mcg with norethisterone 1 mg and 7 inert tab	Brevinor 1/28	2022
Etoposide	Cap 50 mg & 100 mg	Vepesid	2022
Ezetimibe	Tab 10 mg	Ezetimibe Sandoz	2023
Ferrous sulfate	Oral liq 30 mg (6 mg elemental) per ml	Ferodan	2022
Finasteride	Tab 5 mg	Ricit	2023
Flecainide acetate	Tab 50 mg Cap long-acting 100 mg & 200 mg	Flecainide BNM Flecainide Controlled Release Teva	2022
Flucloxacillin	Inj 1 g vial	Flucil	2023
Fluconazole	Cap 50 mg, 150 mg & 200 mg	Mylan	2023
Fluticasone	Aerosol inhaler 50 mcg, 125 mcg & 250mcg per dose, 120 dose OP	Flixotide	2023
Fluticasone with salmeterol	Aerosol inhaler 50 mcg with salmeterol 25 mcg & 125 mcg with salmeterol 25 mcg, 120 dose OP	Seretide	2023
Furosemide [frusemide]	Inj 10 mg per ml, 25 ml ampoule Oral liq 10 mg per ml, 30 ml OP Inj 10 mg per ml, 2 ml ampoule	Lasix Frusemide-Baxter	2022
Gliclazide	Tab 80 mg	Glizide	2023
Glucagon hydrochloride	Inj 1 mg syringe kit	Glucagen Hypokit	2023
Glucose [Dextrose]	Inj 50%, 10 ml ampoule Inj 50%, 90 ml bottle	Biomed	2023
Glycerin with sodium saccharin	Suspension	Ora-Sweet SF	2022
Glycerin with sucrose	Suspension	Ora-Sweet	2022
Glycerol	Liquid	healthE Glycerol BP	2023

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Goserelin	Implant 3.6 mg & 10.8 mg, syringe	Teva	2023
Haloperidol	Inj 5 mg per ml, 1 ml ampoule Oral liq 2 mg per ml Tab 500 mcg, 1.5 mg & 5 mg	Serenace	2022
Hepatitis A vaccine	Inj 1440 ELISA units in 1 ml syringe Inj 720 ELISA units in 0.5 ml syringe	Havrix Havrix Junior	2024
Hepatitis B recombinant vaccine	Inj 20 mcg per 1 ml prefilled syringe	Engerix-B	2024
Human papillomavirus (6, 11, 16, 18, 31, 33, 45, 52 and 58) vaccine [HPV]	Inj 270 mg in 0.5 ml syringe	Gardasil 9	2024
Hydrocortisone	Crn 1%, 500 g Crn 1%, 100 g OP	Hydrocortisone (PSM)	2022
Hydrocortisone and paraffin liquid and lanolin	Lotn 1% with paraffin liquid 15.9% and lanolin 0.6%	DP Lotn HC	2023
Hydroxyurea [hydroxycarbamide]	Cap 500 mg	Devatis	2023
Hyoscine butylbromide	Tab 10 mg Inj 20 mg, 1 ml	Buscopan	2023
Ibuprofen	Tab 200 mg	Relieve	2024
Iloprost	Nebuliser soln 10 mcg per ml, 2 ml	Ventavis	2022
Imatinib mesylate	Cap 100 mg & 400 mg	Imatinib-Rex	2023
Indapamide	Tab 2.5 mg	Dapa-Tabs	2023
Intra-uterine device	IUD 29.1 mm length x 23.2 mm width IUD 33.6 mm length x 29.9 mm width IUD 35.5 mm length x 19.6 mm width	Choice TT380 Short Choice TT380 Standard Choice Load 375	2022
Ipratropium bromide	Aqueous nasal spray, 0.03%, 15 ml OP Nebuliser soln, 250 mcg per ml, 2 ml ampoule	Univent	2023 2022
Isosorbide mononitrate	Tab 20 mg Tab long-acting 40 mg Tab long-acting 60 mg	ISMO 20 ISMO 40 Retard Duride	2023
Ispaghula (psyllium) husk	Powder for oral soln, 500 g OP	Konsyl-D	2023
Itraconazole	Cap 100 mg	Itrazole	2022
Ketoconazole	Shampoo 2%, 100 ml OP	Sebizole	2023
Labetalol	Tab 100 mg & 200 mg	Trandate	2024
Lactulose	Oral liq 10 g per 15 ml	Laevolac	2022
Lamivudine	Tab 100 mg Tab 150 mg	Zetlam Lamivudine Alphapharm	2023

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Lamotrigine	Tab dispersible 25 mg, 50 mg & 100 mg	Logem	2022
Leflunomide	Tab 10 mg & 20 mg	Arava	2023
Levetiracetam	Tab 250 mg, 500 mg, 750 mg and 1,000 mg	Everet	2022
Levodopa with carbidopa	Tab long-acting 200 mg with carbidopa 50 mg Tab 100 mg with carbidopa 25 mg & 250 mg with carbidopa 25 mg	Sinemet CR Sinemet	2023
Levomepromazine hydrochloride	Inj 25 mg per ml, 1 ml ampoule	Nozinan	2022
Levomepromazine maleate	Tab 25 mg & 100 mg	Nozinan	2022
Levonorgestrel	Subdermal implant (2 x 75 mg rods) Tab 30 mcg Intra-uterine device system 52 mg Intra-uterine device system 13.5 mg	Jadelle Microlut Mirena Jaydess	2023 2022 31/10/2022
Lidocaine [Lignocaine]	Gel 2%, 11 ml urethral syringe	Instillagel Lido	2022
Lidocaine [lignocaine] hydrochloride	Inj 2%, 5 ml ampoule Inj 1%, 20 ml vial Inj 2%, 20 ml vial	Lidocaine-Clarix Lidocaine-Baxter Lidocaine-Clarix Lidocaine-Clarix Lidocaine-Baxter	2022
Loperamide hydrochloride	Cap 2 mg	Diamide Relief	2022
Loratadine	Tab 10 mg	Lorafix	2022
Losartan potassium	Tab 12.5 mg, 25 mg, 50 mg & 100 mg	Losartan Actavis	2023
Macrogol 3350 with potassium chloride, sodium bicarbonate and sodium chloride	Powder for oral soln 13.125 g with potassium chloride 46.6 mg, sodium bicarbonate 178.5 mg and sodium chloride 350.7 mg	Molaxole	2023
Magnesium sulphate	Inj 2 mmol per ml, 5 ml ampoule	Martindale	2023
Measles, mumps and rubella vaccine	Inj, measles virus 1,000 CCID ₅₀ , mumps virus 5,012 CCID ₅₀ , Rubella virus 1,000 CCID ₅₀ ; prefilled syringe/ampoule of diluent 0.5 ml	Priorix	2024
Mebeverine hydrochloride	Tab 135 mg	Colofac	2023
Medroxyprogesterone acetate	Inj 150 mg per ml, 1 ml syringe	Depo-Provera	2022
Meningococcal (groups A, C, Y and W-135) conjugate vaccine	Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier per 0.5 ml vial	Menactra	2024
Mercaptopurine	Tab 50 mg	Puri-nethol	2022

*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated unless otherwise stated. Please note that Sole Subsidised Supply may have been awarded for a wider scope than just those presentation(s) listed in the above table.

Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Mesalazine	Tab long-acting 500 mg	Pentasa	2023
Mesna	Tab 400 mg & 600 mg	Uromitexan	2022
Methadone hydrochloride	Tab 5 mg	Methatabs	2022
Methotrexate	Inj 100 mg per ml, 50 ml vial	Methotrexate Ebewe	2023
Methylcellulose	Powder Suspension	Midwest Ora Plus	2022
Methylcellulose with glycerin and sodium saccharin	Suspension	Ora Blend SF	2022
Methylcellulose with glycerin and sucrose	Suspension	Ora Blend	2022
Methyl hydroxybenzoate	Powder	Midwest	2022
Methylprednisolone aceponate	Crn & oint 0.1%, 15 g OP	Advantan	2023
Metoclopramide hydrochloride	Tab 10 mg Inj 5 mg per ml, 2 ml ampoule	Metoclopramide Actavis 10 Pfizer	2023 2022
Metoprolol tartrate	Inj 1 mg per ml, 5 ml vial	Metoprolol IV Mylan	01/02/2022
Metronidazole	Tab 200 mg & 400 mg	Metrogyl	2023
Metyrapone	Cap 250 mg	Metopirone	2023
Miconazole nitrate	Crn 2%, 15 g OP Vaginal crn 2% with applicator, 40 g OP	Multichem Micreme	2023
Montelukast	Tab 4 mg, 5 mg & 10 mg	Montelukast Mylan	2022
Morphine sulphate	Tab immediate-release 10 mg & 20 mg Cap long-acting 10 mg, 30 mg, 60 mg & 100 mg	Sevredol m-Eslon	2023 2022
Moxifloxacin	Tab 400 mg	Avelox	2023
Multivitamins	Tab (BPC cap strength)	Mvite	2022
Naltrexone hydrochloride	Tab 50 mg	Naltraccord	2023
Nicorandil	Tab 10 mg & 20 mg	Ikorel	2022
Nitrofurantoin	Cap modified-release 100 mg	Macrobid	2023
Nortriptyline hydrochloride	Tab 10 mg & 25 mg	Norpress	2022
Nystatin	Oral liq 100,000 u per ml, 24 ml OP Vaginal crn 100,000 u per 5 g with applicator(s), 75 g OP	Nilstat	2023
Oestriol	Crn 1 mg per g with applicator, 15 g OP Pessaries 500 mcg Tab 2 mg	Ovestin Ovestin	2023

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Olanzapine	Orodispersible tab 5 mg & 10 mg Tab 2.5 mg, 5 mg and 10 mg	Zypine ODT Zypine	2023
Olopatadine	Eye drops 0.1%, 5 ml OP	Olopatadine Teva	2022
Omeprazole	Cap 10 mg	Omeprazole actavis 10	2023
	Cap 20 mg	Omeprazole actavis 20	
	Cap 40 mg	Omeprazole actavis 40	
	Inj 40 mg ampoule with diluent	Dr Reddy's Omeprazole	2022
Ondansetron	Tab disp 4 mg & 8 mg	Ondansetron ODT- DRLA	2023
	Tab 4 mg & 8 mg	Onrex	2022
Pantoprazole	Tab EC 20 mg & 40 mg	Panzop Relief	2022
Paracetamol	Oral liq 120 mg per 5 ml	Paracare	2023
	Oral liq 250 mg per 5 ml	Paracare Double Strength	
Paraffin	White soft, 500 g & 2,500 g	healthE	2022
Paroxetine	Tab 20 mg	Loxamine	2022
Perhexiline maleate	Tab 100 mg	Pexsig	2022
Permethrin	Crn 5%, 30 g OP	Lyderm A-Scabies	2023
	Lotn 5%, 30 ml OP		
Phenoxymethylpenicillin (penicillin V)	Grans for oral liq 125 mg per 5 ml	AFT	2022
	Grans for oral liq 250 mg per 5 ml		
Pimecrolimus	Crn 1%, 15 g OP	Elidel	2023
Pine tar with trolamine laurisulfate and fluorescein	Soln 2.3% with trolamine laurilsulfate and fluorescein sodium	Pinetarsol	2023
Pneumococcal (PCV10) conjugate vaccine	Inj 1 mcg of pneumococcal polysaccharide serotypes 1, 5, 6B, 7F, 9V, 14 and 23F; 3 mcg of pneumococcal polysaccharide serotypes 4, 18C and 19F in 0.5 ml prefilled syringe	Synflorix	2024
Pneumococcal (PPV23) polysaccharide vaccine	Inj 575 mcg in 0.5 ml prefilled syringe (25 mcg of each 23 pneumococcal serotype)	Pneumovax 23	2024
Poliomyelitis vaccine	Inj 80D antigen units in 0.5 ml syringe	IPOL	2024
Poloxamer	Oral drops 10%, 30 ml OP	Coloxyl	2023
Potassium iodate	Tab 253 mcg (150 mcg elemental iodine)	NeuroTabs	2023
Povidone iodine	Oint 10%, 65 g OP	Betadine	2023
Pramipexole hydrochloride	Tab 0.25 mg & 1 mg	Ramipex	2022

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Pravastatin	Tab 20 mg & 40 mg	Pravastatin Mylan	2023
Prochlorperazine	Tab 5 mg	Nausafix	2023
Pyridostigmine bromide	Tab 60 mg	Mestinon	2022
Pyridoxine hydrochloride	Tab 25 mg	Vitamin B6 25	2023
Quetiapine	Tab 25 mg, 100 mg, 200 mg & 300 mg	Quetapel	2023
Rifampicin	Cap 150 mg & 300 mg Oral liq 100 mg per 5 ml	Rifadin	2023
Rifaximin	Tab 550 mg	Xifaxan	2023
Risedronate sodium	Tab 35 mg	Risedronate Sandoz	2022
Risperidone	Tab 0.5 mg, 1 mg, 2 mg, 3 mg & 4 mg Oral liq 1 mg per ml	Risperidone (Teva) Risperon	2023
Ritonavir	Tab 100 mg	Norvir	2022
Rituximab	Inj 100 mg per 10 ml vial & 500 mg per 50 ml vial	Riximyo	30/09/2023
Rizatriptan	Tab orodispersible 10 mg	Rizamelt	2023
Ropinirole hydrochloride	Tab 0.25 mg, 1 mg, 2 mg & 5 mg	Ropin	2022
Rotavirus oral vaccine	Oral susp live attenuated human rotavirus 1,000,000 CCID50 per dose, prefilled oral applicator	Rotarix	2024
Roxithromycin	Tab 150 mg & 300 mg	Arrow-Roxithromycin	2022
Sertraline	Tab 50 mg & 100 mg	Setrona	2022
Simvastatin	Tab 10 mg, 20 mg, 40 mg & 80 mg	Simvastatin Mylan	2023
Sodium bicarbonate	Powder BP	Midwest	2022
Sodium chloride	Inj 0.9%, 5 ml ampoule, 10 ml ampoule & 20 ml ampoule Nebuliser soln, 7%, 90 ml OP	Fresenius Kabi Biomed	2022
Sodium citrate with sodium lauryl sulphoacetate	Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml	Micolette	2022
Sodium citro-tartrate	Grans eff 4 g sachets	Ural	2023
Sodium cromoglicate	Eye drops 2%, 5 ml OP	Rexacrom	2022
Sotalol	Tab 80 mg & 160 mg	Mylan	2022
Spirolonactone	Oral liq 5 mg per ml, 25 ml OP	Biomed	2022
Sulfasalazine	Tab EC 500 mg	Salazopyrin EN	2022
Sumatriptan	Inj 12 mg per ml, 0.5 ml prefilled pen, 2 OP Tab 50 mg & 100 mg	Imigran Apo-Sumatriptan	2022
Sunscreen, proprietary	Lotn, 200 g OP	Marine Blue Lotion SPF 50+	2022

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Sole Subsidised Supply (SSS) or Principal Supply Status (PSS) Products – Cumulative to August 2021

Generic Name	Presentation	Brand Name	Expiry Date*
Syrup (pharmaceutical grade)	Liq	Midwest	2022
Taliglucerase alfa	Inj 200 unit vial	Eleyso	2023
Tamoxifen citrate	Tab 10 mg & 20 mg	Tamoxifen Sandoz	2023
Tamsulosin hydrochloride	Cap 400 mcg	Tamsulosin-Rex	2022
Temazepam	Tab 10 mg	Normison	2023
Temozolomide	Cap 5 mg, 20 mg, 100 mg, 140 mg & 250 mg	Temacord	2022
Tenoxicam	Tab 20 mg	Tilocotil	2022
Terbinafine	Tab 250 mg	Deolate	2023
Teriflunomide	Tab 14 mg	Aubagio	2023
Tetrabenazine	Tab 25 mg	Motetis	2022
Theophylline	Tab long-acting 250 mg Oral liq 80 mg per 15 ml	Nuelin-SR Nuelin	2022
Timolol	Eye drops 0.25% & 0.5%, 5 ml OP	Arrow-Timolol	2023
Tobramycin	Solution for inhalation 60 mg per ml, 5 ml	Tobramycin BNM	2023
Tramadol hydrochloride	Cap 50 mg Tab sustained-release 100 mg Tab sustained-release 150 mg Tab sustained-release 200 mg	Arrow-Tramadol Tramal SR 100 Tramal SR 150 Tramal SR 200	2023
Tranexamic acid	Tab 500 mg	Mercury Pharma	2022
Triamcinolone acetonide	Inj 10 mg per ml, 1 ml ampoule Inj 40 mg per ml, 1 ml ampoule Paste 0.1%, 5 g OP Crm & oint 0.02%, 100 g OP	Kenacort-A 10 Kenacort-A 40 Kenalog in Orabase Aristocort	2023
Tuberculin PPD [Mantoux] test	Inj 5 TU per 0.1 ml, 1 ml vial	Tubersol	2024
Ursodeoxycholic acid	Cap 250 mg	Ursosan	2023
Vancomycin	Inj 500 mg vial	Mylan	2023
Varicella vaccine [Chickenpox vaccine]	Inj 1350 PFU prefilled syringe	Varivax	2024
Zinc sulphate	Cap 137.4 mg (50 mg elemental)	Zincaps	2022
Zoledronic acid	Inj 0.05 mg per ml, 100 ml, vial, 100 ml OP	Aclasta	2022

August changes are in bold type

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Subsidy
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New Listings

Effective 1 August 2021

21	INSULIN PUMP INFUSION SET (STEEL CANNULA, STRAIGHT INSERTION) – Special Authority see SA1985 – Retail pharmacy			
	a) Maximum of 3 sets per prescription			
	b) Only on a prescription			
	c) Maximum of 13 infusion sets will be funded per year.			
	6 mm steel cannula; straight insertion;			
	80 cm line × 10 with 10 needles	130.00	1 OP	✓TruSteel
	8 mm steel cannula; straight insertion;			
	80 cm line × 10 with 10 needles	130.00	1 OP	✓TruSteel
54	INDAPAMIDE			
	* Tab 2.5 mg.....	11.61	100	✓Mylan Indapamide S29
	Wastage claimable			
80	CYPROTERONE ACETATE			
	Tab 50 mg.....	14.37	50	✓Rex S29
	Wastage claimable			
110	IBUPROFEN			
	* Tab long-acting 800 mg.....	3.05	30	✓Brufen SR
116	FEBUXOSTAT – Special Authority see SA2054 – Retail pharmacy			
	Tab 80 mg.....	20.00	28	✓Febuxostat multichem
	Tab 120 mg.....	20.00	28	✓Febuxostat multichem
118	RASAGILINE			
	* Tab 1 mg.....	53.50	30	✓Azilect S29
	Wastage claimable			
121	PARACETAMOL			
	Tab 500 mg - blister pack.....	19.75	1,000	✓Pacimol
	a) Maximum of 300 tab per prescription; can be waived by endorsement			
	b) Up to 30 tab available on a PSO			
	c)			
	1) Subsidy by endorsement for higher quantities is available for patients with long term conditions who require regular daily dosing for one month or greater, and the prescription is annotated accordingly. Pharmacists may annotate the prescription as endorsed where dispensing history supports a long-term condition.			
	2) Maximum of 100 tab per dispensing for non-endorsed patients. If quantities prescribed for more than 100 tabs (for non-endorsed patients), then dispense in repeat dispensings not exceeding 100 tab per dispensing.			
125	MIRTAZAPINE			
	Tab 30 mg.....	2.60	28	✓Noumed S29
	Tab 45 mg.....	3.45	28	✓Noumed S29
	Wastage claimable			

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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New Listings – effective 1 August 2021 (continued)

145	CYCLOPHOSPHAMIDE Tab 50 mg – PCT – Retail pharmacy-Specialist.....	145.00	50	✓ Cyclonex
225	PIRFENIDONE – Retail pharmacy-Specialist – Special Authority see SA2013 Note: Pirfenidone is not subsidised in combination with subsidised nintedanib. Tab 267 mg.....	1,215.00	90	✓ Esbriet
233	SODIUM HYALURONATE [HYALURONIC ACID] – Special Authority see SA1388 – Retail pharmacy Eye drops 1 mg per ml..... Hylo-Fresh has a 6 month expiry after opening. The Pharmacy Procedures Manual restriction allowing one bottle per month is not relevant and therefore only the prescribed dosage to the nearest OP may be claimed. Note – this is a new listing for Pharmacode 2608162.	13.85	10 ml OP	✓ Hylo-Fresh
252	ENTERAL FEED 2 KCAL/ML – Special Authority see SA1195 – Hospital pharmacy [HP3] Liquid.....	11.00	1,000 ml OP	✓ Ensure Two Cal HN RTH

▲ Three months supply may be dispensed at one time if endorsed “certified exemption” by the prescriber or pharmacist

* Three months or six months, as applicable, dispensed all-at-once

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Changes to Restrictions, Chemical Names and Presentations Effective 1 August 2021

8	MISOPROSTOL (removal of subsidy by endorsement) Subsidised on a PSO only if from a Family Planning New Zealand Clinic or an abortion service provider with a DHB contract and the PSO is endorsed with the name of the institution for which the PSO is required. * Tab 200 mcg – Up to 120 tab available on a PSO.....	41.50	120	✓ Cytotec
47	PRAZOSIN – Subsidy by endorsement (addition of subsidy by endorsement) Subsidy by endorsement – Subsidised for patients who were taking prazosin prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of prazosin. * Tab 1 mg..... * Tab 2 mg..... * Tab 5 mg.....	5.53 7.00 11.70	100 100 100	✓ Apo-Prazosin ✓ Apo-Prazosin ✓ Apo-Prazosin
51	PINDOLOL – Subsidy by endorsement (addition of subsidy by endorsement) Subsidy by endorsement – Subsidised for patients who were taking pindolol prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of pindolol. * Tab 5 mg..... * Tab 10 mg..... * Tab 15 mg.....	13.22 23.12 33.31	100 100 100	✓ Apo-Pindolol ✓ Apo-Pindolol ✓ Apo-Pindolol
52	NIFEDIPINE (brand name change) * Tab long-acting 20 mg..... * Tab long-acting 30 mg..... * Tab long-acting 60 mg..... Wastage claimable	9.12 34.10 52.81	50 100 100	✓ Mylan (12 hr release) S29 ✓ Mylan (24 hr release) S29 ✓ Mylan (24 hr release) S29
77	MIFEPRISTONE (removal of subsidy by endorsement) Subsidised on a PSO only if from a Family Planning New Zealand Clinic or an abortion service provider with a DHB contract and the PSO is endorsed with the name of the institution for which the PSO is required. Tab 200 mg..... a) Up to 15 tab available on a PSO b) Only on a PSO	60.00 180.00	1 3	✓ Mifegyne ✓ Mifegyne
118	SELEGILINE HYDROCHLORIDE – Subsidy by endorsement (addition of subsidy by endorsement) Subsidy by endorsement – Subsidised for patients who were taking selegiline hydrochloride prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of selegiline hydrochloride. * Tab 5 mg..... Wastage claimable	22.00	100	✓ Apo-Selegiline S29 S29
127	PREGABALIN (reinstate stat dispensing) Note: Not subsidised in combination with subsidised gabapentin * Cap 25 mg.....	2.25	56	✓ Pregabalin Pfizer

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Changes to Restrictions – effective 1 August 2021 (continued)

145	CYCLOPHOSPHAMIDE (move wastage claimable to section 29 brands) Tab 50 mg – PCT – Retail pharmacy-Specialist.....	79.00 145.00 158.00	50 50 100	✓ Endoxan S29 ✓ Cyclonex ✓ Procytox S29
	Wastage claimable			
164	MEGESTROL ACETATE – Subsidy by endorsement (addition of subsidy by endorsement) Subsidy by endorsement – Subsidised for patients who were taking megestrol acetate prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of megestrol acetate. Tab 160 mg.....	63.53	30	✓ Apo-Megestrol
197	RITUXIMAB (RIXIMYO) – PCT only – Specialist – Special Authority see SA20612020 (amended Special Authority criteria – new criteria shown only) Inj 100 mg per 10 ml vial Inj 500 mg per 50 ml vial Inj 1 mg for ECP	275.33 688.20 1.38	2 1 1 mg	✓ Riximyo ✓ Riximyo ✓ Baxter (Riximyo)
	▶ SA2061 2020 Special Authority for Subsidy Initial application – (B-cell acute lymphoblastic leukaemia/lymphoma*) only from a relevant specialist or medical practitioner on the recommendation of a relevant specialist. Approvals valid for 2 years for applications meeting the following criteria: All of the following: 1 Patient has newly diagnosed B-cell acute lymphoblastic leukaemia/lymphoma*; and 2 Treatment must be in combination with an intensive chemotherapy protocol with curative intent; and 3 The total rituximab dose would not exceed the equivalent of 375 mg/m² per dose for a maximum of 18 doses. Notes: Indications marked with * are unapproved indications.			
268	MENINGOCOCCAL B MULTICOMPONENT VACCINE – [Xpharm] (amended restriction criteria) Either: A) Both: 1. Child is under one year of age; and 2. Any of the following: a) up to three doses and a booster every five years for patients pre- and post-splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre- or post-solid organ transplant; or b) up to three doses for close contacts of meningococcal cases of any group; or c) up to three doses for child who has previously had meningococcal disease of any group; or d) up to three doses for bone marrow transplant patients; or e) up to three doses for child pre- and post-immunosuppression*; or B) Both: 1. Person is one year of age or over; and 2. Any of the following: a) up to two doses and a booster every five years for patients pre- and post-splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre- or post-solid organ transplant; or b) up to two doses for close contacts of meningococcal cases of any group; or c) up to two doses for person who has previously had meningococcal disease of any group; or d) up to two doses for bone marrow transplant patients; or e) up to two doses for person pre- and post-immunosuppression* *Immunosuppression due to corticosteroid or other immunosuppressive therapy must be for a period of greater than 28 days. Inj 175 mcg per 0.5 ml prefilled syringe	0.00	1	✓ Bexsero

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber or pharmacist

* Three months or six months, as applicable, dispensed all-at-once

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Changes to Restrictions – effective 1 August 2021 (continued)

269 MENINGOCOCCAL (GROUPS A, C, Y AND W-135) CONJUGATE VACCINE – [Xpharm] (amended restriction criteria)

Either:

1. Any of the following:

- a) Up to three doses and a booster every five years for patients pre- and post-splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre- or post-solid organ transplant; or
- b) One dose for close contacts of meningococcal cases **of any group**; or
- c) **One dose for person who has previously had meningococcal disease of any group; or**
- d) A maximum of two doses for bone marrow transplant patients; or
- e) A maximum of two doses for ~~patients~~**person** pre- and post-immunosuppression*

2. Both:

- a) Person is aged between 13 and 25 years, inclusive; and
- b) Either:
 - i. One dose for individuals who are entering within the next three months, or in their first year of living in boarding school hostels, tertiary education halls of residence, military barracks, or prisons; or
 - ii. One dose for individuals who are currently living in boarding school hostels, tertiary education halls of residence, military barracks, or prisons, from 1 December 2019 to 30 November 2021.

Note: children under seven years of age require two doses 8 weeks apart, a booster dose three years after the primary series and then five yearly.

*Immunosuppression due to steroid or other immunosuppressive therapy must be for a period of greater than 28 days.

Inj 4 mcg of each meningococcal polysaccharide conjugated to a total of approximately 48 mcg of diphtheria toxoid carrier

per 0.5 ml vial 0.00 1 ✓ **Menactra**

269 MENINGOCOCCAL C CONJUGATE VACCINE – [Xpharm] (amended restriction criteria)

Both:

1. Child is under 9 months of age; and

2. Any of the following:

- a) Up to three doses for patients pre- and post-splenectomy and for patients with functional or anatomic asplenia, HIV, complement deficiency (acquired or inherited), or pre- or post-solid organ transplant; or
- b) Two doses for close contacts of meningococcal cases **of any group**; or
- c) **Two doses for child who has previously had meningococcal disease of any group; or**
- d) A maximum of two doses for bone marrow transplant patients; or
- e) A maximum of two doses for ~~patients~~**child** pre- and post-immunosuppression*

Note: children under nine months of age require two doses 8 weeks apart. Refer to the Immunisation Handbook for booster schedules with meningococcal ACWY vaccine.

*Immunosuppression due to steroid or other immunosuppressive therapy must be for a period of greater than 28 days.

Inj 10 mcg in 0.5 ml syringe 0.00 1 ✓ **Neisvac-C**

Changes to Subsidy and Manufacturer's Price

Effective 1 August 2021

11	GLIBENCLAMIDE († subsidy) * Tab 5 mg.....	7.50	100	✓ Daonil
12	PIOGLITAZONE († subsidy) * Tab 15 mg..... * Tab 30 mg..... * Tab 45 mg.....	6.80 7.30 12.25	90 90 90	✓ Vexazone ✓ Vexazone ✓ Vexazone
49	ATROPINE SULPHATE († subsidy) * Inj 600 mcg per ml, 1 ml ampoule – Up to 5 inj available on a PSO.....	15.09	10	✓ Martindale
50	ATENOLOL († subsidy) * Tab 50 mg..... * Tab 100 mg.....	9.33 14.20	500 500	✓ Mylan Atenolol ✓ Mylan Atenolol
52	FELODIPINE († subsidy) * Tab long-acting 5 mg.....	4.07	90	✓ Felo 5 ER
54	CLONIDINE HYDROCHLORIDE († subsidy) * Tab 150 mcg..... * Inj 150 mcg per ml, 1 ml ampoule.....	37.07 29.68	100 10	✓ Catapres ✓ Medsurge
58	SILDENAFIL – Special Authority see SA1992 – Retail pharmacy († subsidy) Tab 25 mg..... Tab 50 mg..... Tab 100 mg.....	0.85 1.70 10.20	4 4 12	✓ Vedafile ✓ Vedafile ✓ Vedafile
61	TRETINOIN († subsidy) Crm 0.5 mg per g – Maximum of 50 g per prescription.....	15.57	50 g OP	✓ ReTrieve
63	BETAMETHASONE VALERATE († subsidy) * Crm 0.1%..... * Oint 0.1%.....	4.53 5.84	50 g OP 50 g OP	✓ Beta Cream ✓ Beta Ointment
69	BETAMETHASONE VALERATE († subsidy) * Scalp app 0.1%.....	9.84	100 ml OP	✓ Beta Scalp
76	OXYTOCIN WITH ERGOMETRINE MALEATE – Up to 5 inj available on a PSO († subsidy) Inj 5 iu with ergometrine maleate 500 mcg per ml, 1 ml.....	30.00	5	✓ Syntometrine
79	DEXAMETHASONE († subsidy) * Tab 0.5 mg – Up to 60 tab available on a PSO..... * Tab 4 mg – Up to 30 tab available on a PSO.....	1.50 2.65	30 30	✓ Dexmethsone ✓ Dexmethsone
80	CYPROTERONE ACETATE († subsidy) Tab 50 mg..... Tab 100 mg.....	14.37 28.03	50 50	✓ Siterone ✓ Siterone

▲ Three months supply may be dispensed at one time if endorsed
“certified exemption” by the prescriber or pharmacist

* Three months or six months, as
applicable, dispensed all-at-once

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Changes to Subsidy and Manufacturer's Price – effective 1 August 2021 (continued)

83	SOMATROPIN (OMNITROPE) – Special Authority see SA2032 – Retail pharmacy († subsidy)			
	* Inj 5 mg cartridge	69.75	1	✓ Omnitrope
	* Inj 15 mg cartridge	139.50	1	✓ Omnitrope
93	FLUCLOXACILLIN († subsidy)			
	Grans for oral liq 25 mg per ml	3.29	100 ml	✓ AFT
	a) Up to 200 ml available on a PSO			
	b) Wastage claimable			
93	PHENOXYMETHYLPENICILLIN (PENICILLIN V) († subsidy)			
	Cap 250 mg – Up to 30 cap available on a PSO	3.84	50	✓ Cilicaine VK
	Cap 500 mg	6.86	50	✓ Cilicaine VK
	a) Up to 20 cap available on a PSO			
	b) Up to 2 x the maximum PSO quantity for RFPP			
96	TOBRAMYCIN († subsidy)			
	Inj 40 mg per ml, 2 ml vial – Subsidy by endorsement.....	18.50	5	✓ Tobramycin Mylan
	Only if prescribed for dialysis or cystic fibrosis patient and the prescription is endorsed accordingly.			
96	TRIMETHOPRIM († subsidy)			
	* Tab 300 mg – Up to 30 tab available on a PSO.....	18.55	50	✓ TMP
96	TRIMETHOPRIM WITH SULPHAMETHOXAZOLE [CO-TRIMOXAZOLE] († subsidy)			
	* Tab trimethoprim 80 mg and sulphamethoxazole 400 mg – Up to 30 tab available on a PSO.....	64.80	500	✓ Trisul
100	ISONIAZID – Retail pharmacy-Specialist († subsidy)			
	a) No patient co-payment payable			
	b) Prescriptions must be written by, or on the recommendation of, an internal medicine physician, paediatrician, clinical microbiologist, dermatologist or public health physician			
	* Tab 100 mg.....	23.00	100	✓ PSM
100	ISONIAZID WITH RIFAMPICIN – Retail pharmacy-Specialist († subsidy)			
	a) No patient co-payment payable			
	b) Prescriptions must be written by, or on the recommendation of, an internal medicine physician, paediatrician, clinical microbiologist, dermatologist or public health physician			
	* Tab 100 mg with rifampicin 150 mg.....	89.82	100	✓ Rifinah
	* Tab 150 mg with rifampicin 300 mg.....	179.13	100	✓ Rifinah
101	VALACICLOVIR († subsidy)			
	Tab 500 mg.....	6.50	30	✓ Vlaclovir
	Tab 1,000 mg.....	13.76	30	✓ Vlaclovir
105	NEVIRAPINE – Special Authority see SA1651 – Retail pharmacy († subsidy)			
	Tab 200 mg.....	84.00	60	✓ Nevirapine Alphapharm
110	DICLOFENAC SODIUM († subsidy)			
	* Tab EC 25 mg	1.99	50	✓ Diclofenac Sandoz
	* Tab EC 50 mg	1.99	50	✓ Diclofenac Sandoz

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Changes to Subsidy and Manufacturer's Price – effective 1 August 2021 (continued)

110	NAPROXEN († subsidy)			
	* Tab 500 mg.....	28.71	250	✓ Noflam 500
	* Tab long-acting 750 mg.....	6.47	28	✓ Naprosyn SR 750
	* Tab long-acting 1 g.....	8.62	28	✓ Naprosyn SR 1000
112	PAMIDRONATE DISODIUM († subsidy)			
	Inj 9 mg per ml, 10 ml vial	75.95	1	✓ Pamisol
117	ORPHENADRINE CITRATE († subsidy)			
	Tab 100 mg.....	20.76	100	✓ Norflex
122	FENTANYL († subsidy)			
	a) Only on a controlled drug form			
	b) No patient co-payment payable			
	c) Safety medicine; prescriber may determine dispensing frequency			
	Patch 12.5 mcg per hour	6.99	5	✓ Fentanyl Sandoz
	Patch 25 mcg per hour	7.99	5	✓ Fentanyl Sandoz
	Patch 50 mcg per hour	9.49	5	✓ Fentanyl Sandoz
	Patch 75 mcg per hour	17.99	5	✓ Fentanyl Sandoz
	Patch 100 mcg per hour	18.59	5	✓ Fentanyl Sandoz
122	METHADONE HYDROCHLORIDE († subsidy)			
	a) Only on a controlled drug form			
	b) No patient co-payment payable			
	c) Safety medicine; prescriber may determine dispensing frequency			
	d) Extemporaneously compounded methadone will only be reimbursed at the rate of the cheapest form available (methadone powder, not methadone tablets).			
	e) For methadone hydrochloride oral liquid refer Standard Formulae			
	Oral liq 2 mg per ml	6.40	200 ml	✓ Biodone
	Oral liq 5 mg per ml	6.40	200 ml	✓ Biodone Forte
	Oral liq 10 mg per ml	7.50	200 ml	✓ Biodone Extra Forte
123	PETHIDINE HYDROCHLORIDE († subsidy)			
	a) Only on a controlled drug form			
	b) No patient co-payment payable			
	c) Safety medicine; prescriber may determine dispensing frequency			
	Tab 50 mg.....	4.70	10	✓ PSM
124	MOCLOBEMIDE († subsidy)			
	* Tab 150 mg.....	11.80	60	✓ Aurorix
	* Tab 300 mg.....	19.25	60	✓ Aurorix
	Note – Price and subsidy increase for Aurorix tab 150 mg applies to Pharmacode 2602385.			
136	MIDAZOLAM – Safety medicine; prescriber may determine dispensing frequency († subsidy)			
	Inj 1 mg per ml, 5 ml ampoule	3.95	10	✓ Mylan Midazolam
		5.50		✓ Midazolam-Baxter
137	DEXAMFETAMINE SULFATE – Special Authority see SA1149 – Retail pharmacy († subsidy)			
	a) Only on a controlled drug form			
	b) Safety medicine; prescriber may determine dispensing frequency			
	Tab 5 mg.....	21.00	100	✓ PSM

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Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price – effective 1 August 2021 (continued)

142	VARENICLINE TARTRATE – Special Authority see SA1845 – Retail pharmacy (↓ subsidy)			
	a) A maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval, including the starter pack			
	b) Varenicline will not be funded in amounts less than 4 weeks of treatment.			
	c) The 6-month time period in which a patient can receive a funded 12-week course of varenicline tartrate starts from the date the Special Authority is approved.			
	Tab 0.5 mg × 11 and 1 mg × 42.....	16.67	53 OP	✓Varenicline Pfizer
	Tab 1 mg.....	17.62	56	✓Varenicline Pfizer
148	METHOTREXATE (↑ subsidy)			
	* Tab 2.5 mg – PCT – Retail pharmacy-Specialist.....	9.98	90	✓Trexate
	* Tab 10 mg – PCT – Retail pharmacy-Specialist.....	33.71	90	✓Trexate
150	DOXORUBICIN HYDROCHLORIDE – PCT only – Specialist (↑ subsidy)			
	Inj 2 mg per ml, 100 ml vial	69.99	1	✓Doxorubicin Ebewe
	Inj 1 mg for ECP	0.35	1 mg	✓Baxter
150	EPIRUBICIN HYDROCHLORIDE – PCT only – Specialist (↑ subsidy)			
	Inj 2 mg per ml, 100 ml vial	99.99	1	✓Epirubicin Ebewe
	Inj 1 mg for ECP	0.50	1 mg	✓Baxter
152	MITOMYCIN C – PCT only – Specialist (↑ subsidy)			
	Inj 1 mg for ECP	470.75	1 mg	✓Baxter
166	LETROZOLE (↑ subsidy)			
	* Tab 2.5 mg.....	5.84	30	✓Letrole
221	CETIRIZINE HYDROCHLORIDE (↓ subsidy)			
	* Oral liq 1 mg per ml	2.84	200 ml	✓Histaclear
223	SALBUTAMOL (↑ subsidy)			
	Nebuliser soln, 1 mg per ml, 2.5 ml ampoule			
	– Up to 30 neb available on a PSO.....	8.96	20	✓Asthalin
	Nebuliser soln, 2 mg per ml, 2.5 ml ampoule			
	– Up to 30 neb available on a PSO.....	9.43	20	✓Asthalin
223	SALBUTAMOL WITH IPRATROPIUM BROMIDE (↑ subsidy)			
	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml ampoule – Up to 20 neb available on a PSO.....	11.04	20	✓Duolin
232	BRIMONIDINE TARTRATE (↓ subsidy)			
	* Eye drops 0.2%	4.29	5 ml OP	✓Arrow-Brimonidine
233	SODIUM HYALURONATE [HYALURONIC ACID] – Special Authority see SA1388 – Retail pharmacy (↓ subsidy)			
	Eye drops 1 mg per ml.....	13.85	10 ml OP	✓Hylo-Fresh
	Hylo-Fresh has a 6 month expiry after opening. The Pharmacy Procedures Manual restriction allowing one bottle per month is not relevant and therefore only the prescribed dosage to the nearest OP may be claimed.			
	Note – this subsidy change is for Pharmacode 2396238.			

Check your Schedule for full details
Schedule page ref

Subsidy
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Generic Mnfr
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Delisted Items

Effective 1 August 2021

9	OMEPRAZOLE For omeprazole suspension refer Standard Formulae			
	* Cap 10 mg	1.98	90	✓ Omeprazole actavis 10
	* Cap 20 mg	1.96	90	✓ Omeprazole actavis 20
	* Cap 40 mg	3.12	90	✓ Omeprazole actavis 40
	Note – these delists apply to Pharmacodes 2524317, 2524325 and 2524333, respectively.			
44	WARFARIN SODIUM Note: Marevan and Coumadin are not interchangeable.			
	* Tab 5 mg.....	5.93	50	✓ Coumadin
	Note – this delist applies to Pharmacode 796832			
47	TERAZOSIN – Subsidy by endorsement Subsidy by endorsement – Subsidised for patients who were taking terazosin prior to 1 October 2020 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of terazosin.			
	Tab 2 mg.....	7.50	500	✓ Apo-Terazosin
		14.20	28	✓ Teva \$29
	Tab 5 mg.....	10.90	500	✓ Apo-Terazosin
		24.80	28	✓ Teva \$29
52	TIMOLOL – Subsidy by endorsement Subsidy by endorsement – Subsidised for patients who were taking timolol prior to 1 March 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of timolol.			
	* Tab 10 mg.....	10.55	100	✓ Apo-Timol
52	NIFEDIPINE			
	* Tab long-acting 10 mg.....	10.63	60	✓ Adalat 10 ✓ Adefin \$29
	* Tab long-acting 30 mg.....	3.14	30	✓ Adalat Oros
	* Tab long-acting 60 mg.....	5.67	30	✓ Adalat Oros ✓ Adefin XL
64	DIFLUCORTOLONE VALERATE Fatty oint 0.1%.....	8.97 (15.86)	50 g OP	Nerisone
81	OESTRADIOL			
	* Patch 100 mcg per 24 hours	7.91	4	✓ Climara
	a) No more than 1 patch per week			
	b) Only on a prescription			
	* Patch 50 mcg per 24 hours	7.04	4	✓ Climara
	a) No more than 1 patch per week			
	b) Only on a prescription			
	Note – Climara patch 50 mcg per 24 hours and 100 mcg per 24 hour delist delayed to 1 January 2022.			

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Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
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Delisted Items – effective 1 August 2021 (continued)

93	PHENOXYMETHYLPENICILLIN (PENICILLIN V) Cap 500 mg 4.26	50	✓ Cilicaine VK
	a) Up to 20 cap available on a PSO		
	b) Up to 2 x the maximum PSO quantity for RFPP		
	Note – this delist applies to Pharmacode 2048868.		
98	TERBINAFINE * Tab 250 mg 1.33	14	✓ Deolate
	Note – this delist applies to Pharmacode 2522748		
124	MAPROTILINE HYDROCHLORIDE – Subsidy by endorsement a) Safety medicine; prescriber may determine dispensing frequency b) Subsidy by endorsement – Subsidised for patients who were taking maprotiline hydrochloride prior to 1 September 2020 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of maprotiline hydrochloride.		
	Tab 75 mg 14.01	20	✓ Ludiomil
		30	✓ Ludiomil
233	HYPROMELLOSE * Eye drops 0.5% 19.50	15 ml OP	✓ Methopt
	Note – this delist applies to Pharmacode 207462		
244	ENTERAL/ORAL FEED 1KCAL/ML – Special Authority see SA1099 – Hospital pharmacy [HP3] Liquid 54.00	400 g OP	✓ Kindergen
250	ORAL FEED (POWDER) – Special Authority see SA1859 – Hospital pharmacy [HP3] Powder (vanilla) 8.54	857 g OP	✓ Fortisip

Check your Schedule for full details
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Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Items to be Delisted

Effective 1 October 2021

48	PERINDOPRIL				
	Tab 2 mg.....	3.75	30	✓ Apo-Perindopril	
	Tab 4 mg.....	4.80	30	✓ Apo-Perindopril	
243	DIABETIC ORAL FEED 1KCAL/ML – Special Authority see SA1095 – Hospital pharmacy [HP3]				
	Liquid (vanilla).....	1.78	237 ml OP		
		(2.10)			Sustagen Diabetic

Note – this delist is delayed to 1 February 2022.

Effective 1 November 2021

21	INSULIN PUMP INFUSION SET (STEEL CANNULA, STRAIGHT INSERTION) – Special Authority see SA1985				
	– Retail pharmacy				
	a) Maximum of 3 sets per prescription				
	b) Only on a prescription				
	c) Maximum of 13 infusion sets will be funded per year.				
	6 mm steel cannula; straight insertion;				
	81 cm line × 10 with 10 needles	130.00	1 OP	✓ TruSteel	
	8 mm steel cannula; straight insertion;				
	81 cm line × 10 with 10 needles	130.00	1 OP	✓ TruSteel	

Effective 1 January 2022

12	PIOGLITAZONE				
	* Tab 15 mg.....	1.12	28	✓ Vexazone	
49	ATROPINE SULPHATE				
	* Inj 600 mcg per ml, 1 ml ampoule				
	– Up to 5 inj available on a PSO.....	12.07	10	✓ Hameln S29	
68	PHENOTHRIN				
	Shampoo 0.5%.....	11.36	200 ml OP	✓ Parasidose	
81	OESTRADIOL				
	* Patch 100 mcg per 24 hours	7.91	4	✓ Climara	
	a) No more than 1 patch per week				
	b) Only on a prescription				
	* Patch 50 mcg per 24 hours	7.04	4	✓ Climara	
	a) No more than 1 patch per week				
	b) Only on a prescription				
	Note – this delist has been delayed from 1 August 2021.				
110	IBUPROFEN				
	* Tab long-acting 800 mg.....	5.99	30	✓ Ibuprofen SR BNM	
116	FEBUXOSTAT – Special Authority see SA2054 – Retail pharmacy				
	Tab 80 mg.....	39.50	28	✓ Adenuric	
	Tab 120 mg.....	39.50	28	✓ Adenuric	

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Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Items to be Delisted – effective 1 January 2022 (continued)

125	MIRTAZAPINE					
	Tab 30 mg.....	2.63	30	✓ Apo-Mirtazapine		
	Tab 45 mg.....	3.48	30	✓ Apo-Mirtazapine		
142	VARENICLINE TARTRATE – Special Authority see SA1845 – Retail pharmacy					
	a) A maximum of 12 weeks' varenicline will be subsidised on each Special Authority approval, including the starter pack					
	b) Varenicline will not be funded in amounts less than 4 weeks of treatment.					
	c) The 6-month time period in which a patient can receive a funded 12-week course of varenicline tartrate starts from the date the Special Authority is approved.					
	Tab 0.5 mg × 11 and 1 mg × 42.....	25.64	53 OP	✓ Champix		
	Tab 1 mg.....	27.10	56	✓ Champix		
145	CYCLOPHOSPHAMIDE					
	Tab 50 mg – PCT – Retail pharmacy-Specialist.....	79.00	50	✓ Endoxan	S29	
		158.00	100	✓ Procytox	S29	
225	PIRFENIDONE – Retail pharmacy-Specialist – Special Authority see SA2013					
	Note: Pirfenidone is not subsidised in combination with subsidised nintedanib.					
	Cap 267 mg – Wastage claimable.....	3,645.00	270	✓ Esbriet		
233	SODIUM HYALURONATE [HYALURONIC ACID] – Special Authority see SA1388 – Retail pharmacy					
	Eye drops 1 mg per ml.....	13.85	10 ml OP	✓ Hylo-Fresh		
	Hylo-Fresh has a 6 month expiry after opening. The Pharmacy Procedures Manual restriction allowing one bottle per month is not relevant and therefore only the prescribed dosage to the nearest OP may be claimed.					
	Note – this delist is for Pharmacode 2396238.					

Effective 1 February 2022

121	PARACETAMOL					
	Tab 500 mg - blister pack.....	0.50	20	✓ Medco		
		1.12		✓ Pharmacy Health		
		2.48	100	✓ Ethics Paracetamol Classic		
		11.75	96	✓ Pharmacy Health		
		24.82	1,000	✓ Panadol Mini Caps		
				✓ Paracetamol Pharmacare		
	a) Maximum of 300 tab per prescription; can be waived by endorsement					
	b) Up to 30 tab available on a PSO					
	c)					
	1) Subsidy by endorsement for higher quantities is available for patients with long term conditions who require regular daily dosing for one month or greater, and the prescription is annotated accordingly. Pharmacists may annotate the prescription as endorsed where dispensing history supports a long-term condition.					
	2) Maximum of 100 tab per dispensing for non-endorsed patients. If quantities prescribed for more than 100 tabs (for non-endorsed patients), then dispense in repeat dispensings not exceeding 100 tab per dispensing.					

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Items to be Delisted – effective 1 February 2022 (continued)

243	DIABETIC ORAL FEED 1KCAL/ML – Special Authority see SA1095 – Hospital pharmacy [HP3] Liquid (vanilla).....	1.78	237 ml OP	
		(2.10)		Sustagen Diabetic
	Note – this delist has been delayed from 1 October 2021.			
252	ENTERAL FEED 2 KCAL/ML – Special Authority see SA1195 – Hospital pharmacy [HP3] Liquid.....	11.00	1,000 ml OP	✓ Two Cal HN RTH

Effective 1 May 2022

47	PRAZOSIN – Subsidy by endorsement Subsidy by endorsement – Subsidised for patients who were taking prazosin prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of prazosin.			
	* Tab 1 mg.....	5.53	100	✓ Apo-Prazosin
	* Tab 2 mg.....	7.00	100	✓ Apo-Prazosin
	* Tab 5 mg.....	11.70	100	✓ Apo-Prazosin
51	PINDOLOL – Subsidy by endorsement Subsidy by endorsement – Subsidised for patients who were taking pindolol prior to 1 August 2021 and the prescription is endorsed accordingly. Pharmacists may annotate the prescription as endorsed where there exists a record of prior dispensing of pindolol.			
	* Tab 5 mg.....	13.22	100	✓ Apo-Pindolol
	* Tab 10 mg.....	23.12	100	✓ Apo-Pindolol
	* Tab 15 mg.....	33.31	100	✓ Apo-Pindolol
64	HYDROCORTISONE WITH NATAMYCIN AND NEOMYCIN – Only on a prescription Crm 1% with natamycin 1% and neomycin sulphate 0.5%	3.35	15 g OP	✓ Pimafucort
90	AZITHROMYCIN – Maximum of 5 days treatment per prescription; can be waived by Special Authority see SA1683. A maximum of 24 months of azithromycin treatment for non-cystic fibrosis bronchiectasis will be subsidised on Special Authority. Tab 250 mg.....	8.19	30	✓ Apo-Azithromycin
110	DICLOFENAC SODIUM * Tab long-acting 100 mg.....	25.15	500	✓ Apo-Diclo SR

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New Zealand
Permit No. 478



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